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SOMERSET COUNTY COUNCIL



REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1942

J. F. DAVIDSON,

O.B.E., M.B., Ch.B., D.P.H.,

County Medical Officer of Health.

**To the Chairman and Members of the Public Health and Housing Committee,
Somerset County Council.**

THE CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit my Sixth Annual Report upon the Health Administration of the County. Owing to the present circumstances, this report is reduced in size, and it is, in fact, mainly a summary.

For national security reasons, population and certain other figures have been omitted. Apart from this, an endeavour has been made to retain the continuity of the statistical returns.

The reduction in the evacuee population has diminished some of our difficulties, but the relief is only partial, and Public Health work continues to be full of many problems. On the whole the health statistics of the County are exceptionally good; while the birth-rate shows a welcome rise, the death rate is one of the lowest noted for the County; the rate of infantile mortality is easily the lowest on record for Somerset, while the tuberculosis death rate is also lower.

In spite of the continued strain on our general resources, and in particular the shortage of trained staff, your County Health Department has continued to meet its many obligations, and even to extend its operations more especially with regard to diphtheria immunisation and the supervision of difficult children.

I continue to be greatly indebted to Sir William Savage for his assistance which includes the supervision of the detail of this Report.

I am,

Your obedient Servant,

J. F. DAVIDSON,
County Medical Officer of Health.

Taunton.

October, 1943.

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STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres) : 1,028,992.

Population (1942) omitted at the request of the Ministry of Health.

Live Births:—Total, 7,549; Legitimate 7,120; Illegitimate 429; Still births 244.

Rateable Value:—£2,716,782 (1942).

Sum represented by a penny rate:—£10,866 (1942-43); £10,979 (1943-44).

Birth rate:—15.65. Illegitimate births 5.68 per cent.

Death rate:—11.85.

Deaths under 1 year of age:—248. Rate of infantile mortality:—32.85.

The birth rate shows a welcome rise and is higher than for any period since 1924. It gradually declined up to 1918 to the low figure of 14.22; after the Great War it increased again being highest in 1920 (22.17) and 1921 (19.39). It then continued steadily to decline almost year by year, reaching the very low figure of 12.68 in 1935 and sinking to our lowest figure of 12.56 in 1940. In 1941 it was slightly higher at 13.16. Unfortunately, the percentage of illegitimate births shows a considerable increase over the normal of between 3 and 4 per cent.

The death rate is 11.85, a very low figure for the uncorrected death rate, as when corrected for age and sex distribution it is considerably lower. Actually it is the lowest death rate since 1930 and figures below 12.0 per 1,000 have only been reached in 1923 (11.35), 1926 (11.59), 1928 (11.87) and 1930 (11.70).

The rate of infantile mortality is 32.85, a remarkably low figure and easily the lowest on record, the nearest being for 1939 when it was 38.0. The figures for 1940 (50.9) and 1941 (48.7) were definitely higher.

The causes of death are set out in the Tables, the chief causes of death being heart diseases (1,410 deaths), cancer and other forms of malignant disease (856 deaths), bronchitis and pneumonia (463 deaths), and tuberculosis (219 deaths).

The essential statistical returns covering births, infantile mortality, and deaths are given in the following Tables from I to V.

TABLE 1.

Causes of, and Ages at Death during the Year 1942.

CAUSES OF DEATH.	NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT						
	All ages.	Under 1 year.	1 and under 5 years	5 and under 15 years	15 and under 45 years	45 and under 65 years	65 and up- wards.
Typhoid and paratyphoid fevers	2	0	0	0	0	2	0
Cerebro spinal fever	10	0	2	0	4	4	0
Scarlet fever	0	0	0	0	0	0	0
Whooping cough	3	2	1	0	0	0	0
Diphtheria	8	0	1	4	3	0	0
Tuberculosis of respir. system..	168	0	2	1	100	50	15
Other forms of tuberculosis ...	51	4	13	4	17	9	4
Syphilitic diseases	26	0	0	0	5	15	6
Influenza	57	0	2	0	8	12	35
Measles	0	0	0	0	0	0	0
Acute poliomyelitis and polio-encephalitis	2	0	0	1	1	0	0
Acute inf. encephalitis	7	0	0	0	4	2	1
Cancer of buc. cavity & œ soph. (M), uterus (F)	89	0	0	0	9	36	44
Cancer of stomach & duodenum	155	0	0	0	9	48	98
Cancer of breast	101	0	0	0	11	38	52
Cancer of all other sites	511	0	2	6	25	172	306
Diabetes	48	0	1	1	7	9	30
Intra-cranial vascular lesions ...	643	1	1	0	8	129	504
Heart disease	1410	0	1	3	44	252	1110
Other diseases of circ. system...	163	0	0	0	2	31	130
Bronchitis	278	8	2	1	7	46	214
Pneumonia	185	39	12	3	17	30	84
Other respiratory disease	86	1	1	1	4	41	38
Ulcer of stomach or duodenum	58	0	0	0	11	25	22
Diarrhœa, under 2 years	15	15	0	0	0	0	0
Appendicitis	33	0	0	2	10	15	6
Other digestive diseases	145	3	3	2	23	38	76
Nephritis	229	0	0	1	14	64	150
Puerperal and post-abortion. sepsis	3	0	0	0	3	0	0
Other maternal causes	16	0	0	0	15	1	0
Premature birth	60	60	0	0	0	0	0
Congenital malformations, birth injuries, infantile diseases ...	106	94	3	2	5	2	0
Suicide	39	0	0	0	11	20	8
Road traffic accidents	57	0	5	9	26	8	9
Other violent causes	219	5	12	10	62	51	79
All other causes	735	16	16	2	69	105	527
	5718	248	80	53	534	1255	3548

TABLE II.

Causes of Death at all Ages in each District during the Year 1942.

RURAL DISTRICTS.

CAUSES OF DEATH.	AXBRIDGE.	BATHAVON.	BRIDGWATER.	CHARD.	CLUTTON.	DULVERTON.	FROME.	LANGPORT.	LONG ASHTON.	SHEPTON MALLET.	TAUNTON.	WELLINGTON.	WELLS.	WILLITON.	WINCANTON.	YEOVIL.	TOTAL RURAL DISTRICTS.
Typhoid and paratyphoid fevers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cerebro spinal fever ...	0	1	1	0	1	0	1	0	0	1	0	0	0	0	0	1	6
Scarlet fever ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Whooping cough ...	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	2
Diphtheria ...	0	0	0	0	3	0	0	0	0	0	0	0	0	0	1	1	5
Tuberculosis of respir. system..	6	10	11	5	4	1	5	4	6	2	6	5	2	3	2	3	75
Other forms of tuberculosis ...	1	3	2	1	1	2	1	1	4	3	3	1	2	0	2	2	29
Syphilitic diseases ...	1	2	1	0	0	0	0	1	0	1	0	0	0	1	0	1	8
Influenza ...	3	3	2	2	3	0	3	0	0	0	5	1	2	3	3	3	33
Measles ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Acute poliomyelitis and polio-encephalitis ...	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Acute inf. encephalitis ...	1	1	0	0	0	0	0	1	0	1	0	0	0	0	0	0	4
Cancer of buc. cavity & œ soph. (M), uterus (F) ...	1	5	3	5	2	0	2	1	4	2	1	0	1	3	8	7	45
Cancer of stomach & duodenum	8	3	8	5	9	2	1	6	11	2	10	2	0	5	8	4	84
Cancer of breast ...	5	6	4	2	1	0	2	0	8	3	3	2	1	5	4	1	47
Cancer of all other sites ...	34	16	16	11	14	4	20	12	36	10	12	9	7	18	26	15	260
Diabetes ...	3	2	5	1	4	0	0	1	0	3	2	1	1	0	3	3	29
Intra-cranial vascular lesions ...	37	40	25	15	32	6	14	28	20	11	23	10	9	18	28	23	339
Heart disease ...	71	63	57	32	58	17	46	30	68	35	49	17	38	48	41	41	711
Other diseases of circ. system...	4	12	2	7	8	1	2	2	8	4	3	2	9	0	6	12	82
Bronchitis ...	12	13	18	2	19	2	3	7	10	4	10	7	7	7	12	6	139
Pneumonia ...	6	8	8	7	7	3	4	5	6	3	7	6	4	3	4	5	86
Other respiratory disease ...	4	4	3	2	4	0	1	3	5	1	3	1	2	0	2	6	41
Ulcer of stomach or duodenum	2	0	2	1	1	1	0	1	5	3	2	0	0	2	3	3	26
Diarrhœa, under 2 years ...	2	0	1	0	0	0	0	0	0	0	1	0	0	0	0	1	5
Appendicitis ...	2	2	1	1	1	1	0	0	4	0	1	0	0	3	0	1	17
Other digestive diseases ...	8	5	7	2	3	1	4	5	7	5	6	4	4	3	5	3	72
Nephritis ...	9	8	11	9	5	3	3	12	7	6	9	4	7	6	7	9	115
Puerperal and post-abort. sepsis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other maternal causes ...	3	0	1	0	0	0	0	1	1	1	1	0	0	0	1	0	9
Premature birth ...	1	3	6	0	1	0	1	0	1	3	2	1	2	1	1	7	30
Congenital malformations, birth injuries, infantile diseases ...	3	10	7	0	6	0	1	0	4	3	2	0	5	2	3	4	50
Suicide ...	3	1	3	1	0	0	1	0	2	1	0	2	3	1	3	1	22
Road traffic accidents ...	3	2	4	2	2	1	2	4	1	2	3	2	1	1	3	1	34
Other violent causes ...	8	8	3	1	7	2	0	12	5	5	3	3	3	8	16	3	87
All other causes ...	39	19	30	24	17	5	24	25	27	20	20	12	22	29	45	41	399
All causes ...	280	250	243	139	213	52	141	162	250	135	187	92	132	171	237	208	2892

TABLE III.

Causes of Death at all Ages in each District during the Year 1942.

URBAN DISTRICTS.

CAUSES OF DEATH.	BRIDGWATER.	BURNHAM.	CHARD.	CLEVEDON.	CREWKERNE.	FROME.	GLASTONBURY.	ILMINSTER.	KEYNSHAM.	MINEHEAD.	NORTON-RADSTOCK.	PORTISHEAD.	SHEPTON MALLET.	STREET.	TAUNTON.	WATCHET.	WELLINGTON.	WELLS.	WESTON-SUPER-MARE.	YEovil.	TOTAL URBAN DISTRICTS.	COUNTY TOTAL.
Typhoid and paratyphoid fevers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	2
Cerebro spinal fever ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1	4	10
Scarlet fever ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Whooping cough ...	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	3
Diphtheria ...	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	0	3	8
Tuberculosis of respir. system..	14	1	1	1	1	4	1	0	3	6	1	2	3	0	16	2	6	4	20	7	93	168
Other forms of tuberculosis ...	2	0	0	2	0	0	0	0	2	1	3	2	1	0	2	1	1	1	2	2	22	51
Syphilitic diseases ...	2	1	1	0	0	1	1	0	0	0	1	0	1	1	2	0	1	0	2	4	18	26
Influenza ...	2	2	0	2	1	1	3	0	0	1	1	0	0	0	4	0	0	0	5	2	24	57
Measles ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Acute poliomyelitis and polio-encephalitis ...	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2
Acute inf. encephalitis ...	0	1	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	3	7
Cancer of buc. cavity & œ soph. (M), uterus (F) ...	4	4	2	5	0	5	2	0	2	1	1	1	0	1	5	1	1	1	8	0	44	89
Cancer of stomach & duodenum	7	5	0	5	6	6	0	0	0	2	7	0	1	2	10	0	1	3	15	1	71	155
Cancer of breast ...	3	1	0	8	0	2	2	0	3	4	4	0	2	2	8	0	1	2	7	5	54	101
Cancer of all other sites ...	25	16	2	14	3	14	4	5	8	8	14	1	2	8	35	4	13	4	49	22	251	511
Diabetes ...	2	4	0	1	0	0	0	0	2	0	1	0	1	1	3	2	0	0	1	1	19	48
Intra-cranial vascular lesions ...	20	16	7	18	5	16	9	5	7	17	10	9	4	2	36	2	13	12	69	27	304	643
Heart disease ...	58	39	15	39	12	32	8	4	14	26	39	16	13	11	99	9	22	22	163	58	699	1410
Other diseases of circ. system...	7	2	2	4	1	7	5	1	1	3	3	4	1	2	9	1	4	0	10	14	81	163
Bronchitis ...	13	5	7	6	2	6	5	1	6	10	5	0	5	0	17	4	5	6	22	14	139	278
Pneumonia ...	10	6	0	0	1	4	2	0	3	3	9	1	1	1	19	0	4	0	24	11	99	185
Other respiratory disease ...	7	3	0	2	1	1	2	0	1	0	0	1	0	2	6	3	0	1	10	5	45	86
Ulcer of stomach or duodenum	6	1	2	1	1	0	0	1	3	0	1	0	1	0	4	0	1	0	6	4	32	58
Diarrhœa, under 2 years ...	3	0	0	1	0	0	0	0	0	0	0	0	0	0	3	0	0	0	2	1	10	15
Appendicitis ...	2	0	1	0	0	0	0	0	0	1	1	1	0	0	2	0	0	0	3	5	16	33
Other digestive diseases ...	7	2	2	2	2	1	3	1	3	5	3	0	4	0	9	0	3	0	17	9	73	145
Nephritis ...	10	6	1	20	2	8	4	0	6	2	5	0	1	5	17	1	5	6	14	1	114	229
Puerperal and post-abort. sepsis	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	1	3	3
Other maternal causes ...	2	0	0	1	0	0	1	0	1	0	1	0	0	0	1	0	0	0	0	0	7	16
Premature birth ...	4	4	0	0	0	3	0	1	3	1	2	1	0	0	3	0	1	1	3	3	30	60
Congenital malformations, birth injuries, infantile diseases ...	8	0	0	6	2	4	0	0	1	0	5	0	1	4	5	0	2	1	10	7	56	106
Suicide ...	2	1	1	3	0	1	1	0	1	1	0	0	0	0	2	0	1	0	1	2	17	39
Road traffic accidents ...	3	3	0	0	1	0	0	1	1	2	0	2	0	1	3	0	0	0	3	3	23	57
Other violent causes ...	14	4	0	8	0	4	2	1	1	4	5	1	4	1	6	2	2	2	63	8	132	219
All other causes ...	42	14	10	43	7	20	7	4	11	12	10	5	11	3	33	7	10	9	56	22	333	735
All causes	279	141	54	192	48	141	64	25	84	112	132	48	58	47	361	39	97	75	589	240	2826	5718

TABLE IV.

Table showing, for each Rural District, the number of Deaths of Infants, also the Birth Rate, Death Rate, and Rate of Infantile Mortality.

DISTRICT.				Area. Acres.	No. of Deaths under 1 Year.	Birth Rate.	Death Rate.	Rate of Infantile Mortality.
RURAL:—								
1.	Axbridge	...	...	90,551	8	15.51	10.70	19.7
2.	Bathavon	...	...	42,106	13	16.79	11.41	35.3
3.	Bridgwater	...	...	86,769	20	16.48	12.03	60.1
4.	Chard	...	...	54,600	1	14.84	10.16	4.9
5.	Clutton	...	...	42,641	16	17.83	11.27	47.5
6.	Dulverton	...	...	78,980	4	13.73	9.52	53.3
7.	Frome	...	...	51,933	2	17.36	13.09	10.7
8.	Langport	...	...	59,407	3	13.87	12.02	16.0
9.	Long Ashton	...	...	46,515	8	15.46	10.06	20.8
10.	Shepton Mallet	...	...	47,777	10	16.35	11.68	52.9
11.	Taunton	...	...	70,682	6	13.68	9.99	23.4
12.	Wellington	...	...	37,911	3	12.89	10.78	27.3
13.	Wells	...	...	57,175	8	15.14	12.42	49.7
14.	Williton	...	...	97,364	5	13.41	12.60	27.5
15.	Wincanton	...	...	64,540	6	16.65	13.11	19.9
16.	Yeovil	...	...	53,495	16	15.99	10.05	48.3
Totals of Rural Districts				982,446	129	15.59	11.24	32.2

TABLE V.

Table showing, for each Urban District, the number of Deaths of Infants, also the Birth Rate, Death Rate, and Rate of Infantile Mortality.

DISTRICT.	Area. Acres.	No. of Deaths under 1 Year.	Birth Rate.	Death Rate.	Rate of Infantile Mortality.
URBAN :—					
1. Bridgwater	1,677	17	19.47	12.78	40.0
2. Burnham	2,246	5	15.13	14.61	34.2
3. Chard	1,030	0	18.19	10.56	0.0
4. Clevedon	3,296	6	11.32	19.23	53.1
5. Crewkerne	1,291	2	17.35	12.43	29.8
6. Frome	1,194	6	15.74	11.21	30.3
7. Glastonbury	5,019	0	14.09	12.02	0.0
8. Ilminster	531	1	15.81	8.78	22.2
9. Keynsham	4,170	5	15.65	11.05	42.0
10. Minehead	2,816	3	11.73	13.55	30.9
11. Norton-Radstock	3,370	7	15.06	10.80	38.0
12. Portishead	911	1	16.69	12.14	15.1
13. Shepton Mallet	2,278	3	15.08	11.07	37.8
14. Street	3,069	2	18.24	8.57	20.0
15. Taunton	2,428	20	16.24	11.41	38.9
16. Watchet	493	1	17.92	14.56	20.8
17. Wellington	2,211	5	12.56	13.24	54.3
18. Wells	1,336	3	13.43	11.85	35.3
19. Weston-super-Mare .	4,923	20	14.40	14.28	33.7
20. Yeovil	2,257	12	18.19	10.94	30.1
Totals of Urban Districts	46,546	119	15.72	12.55	33.6
Administrative County ...	1,028,992	248	15.65	11.85	32.8
England and Wales, 1942	—	—	15.8	11.6	49.0

Mental Treatment Act, 1930.

The clinics are held regularly at the following centres:—

Name of Clinic.	Started.	Medical Officer.	No. of Sessions.	New cases seen.	Average attendance per Session.
Taunton and Somerset Hospital	April, 1931	Dr. J. Mackay ...	49	61	8
Shepton Mallet and District Hospital ...	April, 1931	Dr. A. Darlington ...	24	6	1
Weston-super-Mare Hospital	Dec., 1932	Dr. J. McGarvey ...	24	29	3
Bridgwater Health Centre	May, 1938	Dr. J. Mackay ...	24	13	3

The above Table shows that the facilities available are being comparatively little used by medical practitioners. The Yeovil centre has been closed.

Blind Persons Acts, 1920 and 1938.

The general work under these Acts is carried out by the Somerset Blind Association on behalf of, and with a grant from, the County Council. This Association also deals with necessitous Blind and their dependents. Six Home Teachers were employed by the County Blind Association during 1942. There are 20 Home Workers under the supervision of the Bristol Royal Blind Asylum Workshops. At the end of 1942 there were 901 persons in the County registered as blind, compared with 890 at the end of 1941. Certification by a medical practitioner with special experience in ophthalmology is required before registration. Where possible we make use of the County Oculist, Dr. I. B. Georgeson, for certification purposes and during 1942 he examined 53 cases, 38 of whom were admitted to the register.

Prevalence and Control over Infectious and other Diseases.

The Isolation Hospital beds available were the same as for 1940, except that during the year Langport Hospital was given up as being no longer required. The cases of notifiable infectious disease and their distribution are set out in the tables.

The hospital accommodation was found adequate for needs. On the whole the amount of notifiable infectious disease was low, but scarlet fever and whooping cough were at one time prevalent over considerable parts of the County. The most fatal infectious disease was influenza with 57 deaths, but only certain types are notifiable.

Scarlet fever was prevalent with 639 cases but there were no deaths. The largest numbers were in Taunton Borough, Weston-super-Mare Borough, Axbridge Rural, Yeovil Borough and Clutton Rural. A material proportion was isolated in Hospital; far too large a proportion, and as I pointed out last year this is neither an advantage to the community nor to the individual. Indeed, unless cubicle isolation can be provided hospital isolation may be definitely detrimental from reinfection from other strains of streptococci.

There were only 150 notified cases of diphtheria with 8 deaths, a case mortality of 5.3 per cent. Last year I reported that approximately 32,200 Somerset and 10,610 evacuee schoolchildren and 8,550 pre-school children were immunised and protected against diphtheria. This work has been continued all through the year and the additional children immunised were 6,532 Somerset and 322 evacuee schoolchildren and 3,766 pre-school children. The total figures are substantial and should in time have a definite influence on the prevalence of diphtheria.

Enteric diseases (including typhoid and paratyphoid fevers) were only 21 cases, with but 2 deaths. Most of the cases were at Weston-super-Mare where there was a small outbreak of paratyphoid fever.

Fortunately there were only 49 cases of cerebro-spinal meningitis with 10 deaths, giving a case mortality of 20.4 per cent.

Whooping cough with 740 cases showed moderate prevalence. It was more prevalent in the rural districts and was not at all extensive in any urban district. There were only 3 deaths.

Measles was not prevalent and was only extensive in Yeovil Rural. Although there were 381 notifications there were no deaths. This, I believe, constitutes a record.

It is valuable to compare the present position on the control over the mortality from whooping cough and measles with the position 25 years ago. It is not possible to compare notifications as it was not always notifiable.

Year.	Deaths from		Year.	Deaths from	
	Measles.	Whooping Cough.		Measles.	Whooping Cough.
1913 ...	104	26	1938 ...	7	6
1914 ...	16	16	1939 ...	1	4
1915 ...	34	53	1940 ...	12	4
1916 ...	47	33	1941 ...	27	29
1917 ...	3	47	1942 ...	0	3
5 years ...	204	175		47	46
Average per year ...	41	35		9	9

The reduction in deaths over a similar 5-year period 25 years earlier is very striking. In 1916, on the advice of your County Medical Officer of Health, it was made a special duty of the Health Visitors to follow up all cases of measles and whooping cough to prevent complications and deaths so far as possible by sound home advice. As Dr. Savage stated: "The successful management of whooping cough and measles is, in the main, a question of the proper hygienic environment of the cases and the adoption of suitable precautions."

We still cannot prevent the occurrence of these diseases but a very great deal can be done to prevent them being a cause of death and permanent damage to children.

NOTIFICATION OF INFECTIOUS DISEASES.

TABLE VI. (Registrar General's Figures.)

	Measles.	Scarlet Fever.	Diphtheria.	Enteric and Paratyphoid Fevers.	Puerperal Fever and Puerperal Pyrexia.	Ophthalmia Neonatorum.	Cerebro-spinal Meningitis.	Dysentery.	Whooping Cough.	Pneumonia.	Acute Poliomyelitis.	Encephalitis Lethargica.
URBAN												
Bridgwater	28	10	5	0	4	2	0	0	3	12	0	0
Burnham	0	8	0	0	1	1	3	0	5	2	0	1
Chard	1	2	1	0	6	1	1	0	0	4	3	0
Clevedon	0	1	0	0	0	0	0	0	35	7	0	0
Crewkerne	1	8	0	0	2	0	0	0	3	0	0	0
Frome	5	2	1	0	0	0	0	0	0	8	2	0
Glastonbury	3	13	1	0	0	0	0	0	13	5	1	0
Ilminster	1	1	0	0	0	0	0	0	9	6	0	0
Keynsham	8	10	1	1	2	0	0	0	21	3	0	0
Minehead	2	23	2	1	1	1	0	0	1	0	0	0
Norton-Radstock	18	19	1	0	4	0	0	0	38	13	0	0
Portishead	2	0	6	0	0	0	0	0	2	3	0	0
Shepton Mallet	11	4	0	0	0	0	0	0	15	7	1	0
Street	7	3	4	0	1	0	2	0	21	8	0	0
Taunton	31	97	8	0	9	2	3	0	30	24	1	0
Watchet	0	0	1	0	1	0	0	0	0	0	0	0
Wellington	0	15	0	0	6	0	2	0	0	1	0	0
Wells	0	5	2	0	1	0	0	1	0	0	0	0
Weston-super-Mare	9	40	18	14	9	1	6	18	21	22	3	0
Yeovil	4	48	2	0	3	1	2	0	7	26	0	0
RURAL												
Axbridge	8	49	5	1	3	0	6	0	91	9	1	0
Bathavon	6	31	19	0	6	4	2	0	31	25	0	0
Bridgwater	5	26	3	0	1	1	10	1	3	3	0	0
Chard	4	10	0	0	2	2	0	0	21	7	4	0
Clutton	4	41	23	0	3	0	2	0	77	8	0	6
Dulverton	2	3	0	0	0	0	0	0	54	13	0	1
Frome	2	5	1	0	2	0	2	0	9	4	0	0
Langport	1	23	9	0	4	0	0	0	14	5	0	0
Long Ashton	2	18	10	0	3	0	2	0	81	18	2	2
Shepton Mallet	33	19	1	0	7	1	0	0	9	10	0	1
Taunton	3	10	3	1	7	3	1	0	25	12	0	0
Wellington	0	9	2	1	0	1	1	0	8	4	0	0
Wells	28	11	1	1	3	0	0	0	2	1	0	0
Williton	1	25	0	0	0	0	2	0	1	1	0	0
Wincanton	34	31	3	1	0	2	1	0	35	16	1	0
Yeovil	117	19	17	0	5	1	1	0	55	23	2	0
Urban Districts	131	309	53	16	50	9	19	19	224	151	11	1
Rural Districts	250	330	97	5	46	15	30	1	516	159	10	4
Administrative County	381	639	150	21	96	24	49	20	740	310	21	5

VENEREAL DISEASES.

The attendances of Somerset cases at the various clinics for the past three years have been as follows:—

Clinic.	New Cases.				Attendances.			
	1940	1941	1942	Increase or decrease during 1942.	1940	1941	1942	Increase or decrease during 1942.
Bath	5	37	59	+22	190	442	440	- 2
Bristol	33	45	87	+42	481	640	910	+270
Taunton	42	43	47	+ 4	909	1,169	1,348	+179
Yeovil	59	56	78	+22	950	1,492	1,665	+173
Bridgwater	26	42	103	+61	387	589	772	+183
Frome	3	7	41	+34	102	332	428	+ 96
Minehead	5	8	13	+ 5	92	86	85	- 1
Weston-super-Mare ...	50	60	64	+ 4	1,024	1,233	1,028	-205
All Clinics ...	223	298	492	+194	4,135	5,983	6,676	+693

The figures show a material increase during 1942 in both new cases and attendances. It should be noted, however, that the new cases include persons who attended for blood tests or for examination alone, and an appreciable number prove to be non-venereal. The number of new gonorrhœa cases (both sexes) has shown a definite rise in the latter half of the year. This upward tendency has been noted at V.D. centres throughout the country, particularly in regard to the number of women that are being infected. No such rise was noted as regards the number of syphilis cases, but there has been a definite rise in these cases during the first six months of 1943.

During the year the following examinations were made:—

Samples.	For Clinics and Hospitals.	For Medical Practitioners.	Total.
Wasserman ...	494	441	935
Gonococcus ...	0	20	20
Spirochetes ...	1	0	1
Fixation and other tests ...	179	9	188
	674	470	1,144

TUBERCULOSIS.

Year.	Phthisis Death rates.			Other Tuberculous Diseases			Tuberculosis Death-rate.	Deaths in a population of 406,000.	
	Rural.	Urban.	County.	Rural.	Urban.	County.	County.	Phthisis.	All Tuberculosis
1942	0.29	0.41	0.35	0.11	0.10	0.10	0.454	141	184

TABLE VII.

New cases of tuberculosis and deaths from the disease in the County during 1942.

Age Periods.	New cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M	F.	M.	F.	M.	F.	M.	F.
0—1	0	0	2	0	0	0	3	1
1—5	2	1	9	9	2	0	8	5
5—10	3	2	15	11	43	57	9	8
10—15	0	5	9	14				
15—20	33	27	8	8				
20—25	43	45	8	6				
25—35	69	66	9	3	31	19	6	3
35—45	51	30	7	2				
45—55	38	28	1	2				
55—65	16	8	2	1	8	7	2	2
65 and upwards	5	4	1	0				
Totals	260	216	71	56	84	84	30	21

TABLE VIII.
Tuberculosis Notifications and Deaths.

URBAN DISTRICTS.	Number of primary cases notified.		Number of Deaths during the year from Pulmonary Tuberculosis.	Number of Deaths during the year from other varieties of Tuberculosis.	RURAL DISTRICTS.	Number of primary cases notified.		Number of Deaths during the year from Pulmonary Tuberculosis.	Number of Deaths during the year from other varieties of Tuberculosis.
	Pulm.	Non-Pulm.				Pulm.	Non-Pulm.		
Bridgwater	36	4	14	2	Axbridge	19	3	6	1
Burnham	9	2	1	0	Bathavon	18	6	10	3
Chard	5	1	1	0	Bridgwater	27	3	11	2
Clevedon	13	6	1	2	Chard	11	2	5	1
Crewkerne	4	2	1	0	Clutton	8	4	4	1
Frome	16	4	4	0	Dulverton	5	1	1	2
Glastonbury	4	3	1	0	Frome	8	1	5	1
Ilminster	1	0	0	0	Langport	16	7	4	1
Keynsham	5	2	3	2	Long Ashton	29	6	6	4
Minehead	26	6	6	1	Shepton Mallet	6	2	2	3
Norton-Radstock	13	5	1	3	Taunton	20	3	6	3
Portishead	4	2	2	2	Wellington	6	3	5	1
Shepton Mallet	4	3	3	1	Wells	6	2	2	2
Street	1	2	0	0	Williton	14	4	3	0
Taunton	43	6	16	2	Wincanton	11	10	2	2
Watchet	3	1	2	1	Yeovil	20	5	3	2
Wellington	5	2	6	1					
Wells	12	2	4	1					
Weston-s-Mare	28	6	20	2					
Yeovil	20	6	7	2					
Totals	252	65	93	22	Totals	224	62	75	29

TABLE IX.
Admissions to Sanatoria during 1942.

Sanatorium.	Men.	Women.	Children.	Total.
Quantock	91	63	1	155
Chard	5	38	—	43
Taunton	10	21	—	31
Wincanton	22	—	—	22
Compton Bishop	—	—	24	24
Alton Hospital	—	—	8	8
Bath Orthopædic Hospital ...	2	4	11	17
Papworth Hall	2	—	—	2
Southmead Hospital	1	—	—	1
Winford Orthopædic Hospital	16	8	—	24
St. Michael's Home, Axbridge	—	1	—	1
Preston Hall	1	—	—	1
	150	135	44	329

TABLE X.

Cases treated through the County Dispensaries.

Dispensary.	Persons treated at Dispensaries during 1942.		Under treatment at Dispensaries December 31st, 1942.		Total Dispensary Attendances 1942.	Total Persons examined 1942.
	Insured.	Uninsured.	Insured.	Uninsured.		
Bath (County) ...	7	33	2	11	343	156
Bridgwater ...	216	184	20	26	1,069	501
Bristol ...	9	17	2	5	286	146
Chard ...	29	20	12	6	453	143
Clevedon ...	33	68	2	11	427	162
Frome ...	17	56	5	9	231	100
Glastonbury ...	6	6	2	2	176	110
Minehead ...	102	115	72	59	847	564
Radstock ...	13	18	9	4	169	74
Shepton Mallet ...	6	24	1	5	143	85
Taunton ...	207	204	109	62	1,525	675
Weston-super-Mare ...	55	125	24	46	1,059	320
Wincanton ...	3	11	0	1	110	83
Yeovil ...	29	59	8	13	677	339
	732	940	268	260	7,515	3,458
	1,672		528			

Quantock Summer Camp. The Camp was not held this year.

Tuberculosis Officer's Clinical Report for 1942.

Dr. Short, County Tuberculosis Officer, has written the following report:—

The slight improvement in the Tuberculosis situation noted in the last months of 1941 was continued all through 1942, and some measure of control has been re-established, after the rather overwhelming increase in Tuberculosis in all forms in the record year 1941.

There are probably several reasons for this. Many border-line or partially recovered patients were unable to stand up to the conditions prevailing in 1940-41 and they became acute and died. Those surviving have gradually grown more accustomed to war conditions. The lessening of nervous strain and of shelter life resulting from decreasing bomb attacks, and the return of many evacuees to their town areas, has also helped us in Somerset.

It is very gratifying to record that the number of T.B.+ cases, discovered for the first time, fell from 235 to 175 in 1942.

There is a steady stream of men being invalided from the Forces with active Tuberculosis, but many of our old cured cases are doing splendid work in munitions and other essential works, as well as on the land.

Sanatorium or hospital treatment was given to 329 cases. In addition many open-air shelters were provided, those in actual use on December 31st, 1942, being 64. The number of shelters available is 66. Milk, for a period of six or eight weeks was provided in 50 cases. Dental treatment for 3 cases, X-ray examinations for 368.

Treatment by the use of artificial pneumothorax has been continued and the cases dealt with are shewn in the following table:—

	At Dispensary or home of patient.	At Institutions.	Total.
Primary inductions	0	24	24
Refills	244	822	1,066

The new cases seen numbered 1,836, and were classified as follows:—

PULMONARY TUBERCULOSIS.	T.B. Negative	161	
	T.B. Positive Stage 1	12	
	T.B. Positive Stage 2	130	
	T.B. Positive Stage 3	33	
		—	336
NON-PULMONARY TUBERCULOSIS.	Bones and Joints	20	
	Abdominal	10	
	Other Organs	8	
	Peripheral Glands	30	
		—	68
Not Tuberculous			1,403
Diagnosis not completed on 31st December, 1942			29
			—
			1,836
			==

Quantock Sanatorium. The Medical Superintendent, Dr. V. C. Martyn, has furnished the following report:—

The Sanatorium has been open for the reception of 92 cases (50 males and 42 females) throughout the year. During this time 155 cases have been admitted, of whom 91 were males and 64 females. 149 patients were discharged, 88 males and 61 females. One of these cases was not tuberculous. There were also 5 deaths. The average stay for male patients was 224 days and for female patients 242 days. This is an average of 33 weeks for each patient.

Artificial pneumothorax treatment was carried out in all suitable cases. There were 19 inductions, 290 refills for in-patients and 54 for out-patients.*

X-ray.—267 films were taken and 306 cases were screened. 10 cases were operated on for Phrenic Evulsion at Minehead Hospital. 18 cases received Sanocrysin treatment.

RESULTS OF TREATMENT.

WEIGHTS.

Increase in weights in Kilos. (1 Kilo=2.2 lbs.)

			<i>Less than 6.</i>	<i>6—12.</i>	<i>12 and over.</i>	<i>Total.</i>
Males	...	...	39	27	9	75
Females	...	...	28	16	5	49

The average gain in weight of 124 patients weighed on discharge = 6.32 kilos.

„ „ 75 male patients weighed on discharge = 6.69 „

„ „ 49 female patients weighed on discharge = 5.74 „

The average loss in weight of 18 patients weighed on discharge = 2.44 „

12 patients were not weighed on discharge, including 3 who died.

Working capacity of patients on admission and discharge.

		<i>Full Working Capacity</i>		<i>Fit for light work.</i>		<i>Unfit for work.</i>	
		<i>Admission.</i>	<i>Discharge.</i>	<i>Admission.</i>	<i>Discharge.</i>	<i>Admission.</i>	<i>Discharge.</i>
Males	...	0	33	0	9	92	50
Females	...	0	15	0	9	62	38

On admission all patients were unfit for any work. On discharge 31.16 per cent. of all patients were fit for full work; 11.70 per cent. for light work; and 57.14 per cent. were unfit for work.

Classification on admission of patients discharged during 1942.

Tubercle Bacilli.

<i>Classification.</i>		<i>M.</i>	<i>F.</i>	<i>Total.</i>	<i>%</i>	<i>Positive.</i>		<i>Negative.</i>	
						<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
Early	...	32	28	60	38.96	1	3	31	25
Intermediate	...	47	21	68	44.16	34	15	13	6
Advanced	...	13	13	26	16.88	13	12	0	1

Complications presented by patients were:—Larynx infection, Pleura, Asthma.

Chard Sanatorium. During the year the cases admitted were 31 pulmonary cases and 12 non-pulmonary (7 female, 5 male).

From the pulmonary wards there were 27 discharged and 7 deaths, from the female surgical ward 9 discharges, and from the male surgical ward 7 discharges.

1942 was a difficult year for the Sanatorium. At one time the staff was so short that the surgical cases were transferred to Winford Orthopaedic Hospital, but they did not suffer by the move.

Owing to the transfer to Winford and war economy the X-ray apparatus was used less. 133 films were taken and 354 screenings made. Collapse treatment was again used, and was the greatest single aid to treatment. 5 inductions and 474 refills were done during the year.

Compton Bishop Children's Home. During the year 13 boys and 11 girls were admitted, and of these 8 boys and 9 girls were under 10 years of age. The average stay for "definite" (notified) cases was 45 weeks, and for observation cases 24 weeks. The discharges numbered 29, 16 boys and 13 girls, who will be kept under regular supervision at the County Clinics.

TABLE XI.

QUANTOCK SANATORIUM.

Duration of Treatment and Condition on Discharge.

	Under 3 months.									3-6 months.									6-12 months.									More than 12 months.									Totals.			Grand Totals.
	M.			F.			Ch.			M.			F.			Ch.			M.			F.			Ch.			M.			F.			Ch.			M.	F.	Ch.	
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.										
Class TB Minus.	Quiescent	1	3	0	4	4	0	18	13	0	0	0	23	20	0	43																								
	Not quiescent	1	1	0	1	0	0	0	2	0	0	0	2	3	0	5																								
	Died in Institution	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0																								
Class TB + Group 1.	Quiescent	1	0	0	1	0	0	1	3	0	2	1	5	4	0	9																								
	Not quiescent	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0																								
	Died in Institution	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0																								
Class TB + Group 2.	Quiescent	2	0	0	0	0	0	21	9	0	2	0	25	9	0	34																								
	Not quiescent	4	0	0	3	1	0	13	8	0	0	2	20	11	0	31																								
	Died in Institution	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0																								
Class TB + Group 3.	Quiescent	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0																								
	Not quiescent	3	2	0	0	2	0	3	7	0	2	1	8	12	0	20																								
	Died in Institution	1	0	0	0	1	0	1	0	0	0	0	2	1	0	3																								

In 53 out of 85 men discharged the disease was quiescent=62.35 per cent. In 33 out of 60 women discharged the disease was quiescent=55.00 per cent. 4 cases, who had been admitted for observation, were discharged as tuberculous and are included in the above figures. No cases who were at the Sanatorium less than 28 days have been included in the above figures.

MATERNITY AND CHILD WELFARE.

The Midwifery Service. 350 certified midwives notified their intention to practise during the year, 311 working under Committees and 39 independent.

Out of the 215 midwives who worked under the S.C.N.A., 26 resigned and 2 notified for emergency work only, leaving 187 still at work. Of the 45 who notified under independent Associations 11 resigned, leaving 34 still at work. Of the 39 trained midwives working on their own 13 had no midwifery or maternity cases, which left 26 actually at work. 11 worked only as maternity nurse under a medical man. During the year only one amalgamation of smaller districts has been effected.

The percentage of 1942 births in the County attended by the nurses as midwives was 61.2.

Summary for all Midwives during the Year.

Cases attended as midwife ...	...	...	...	...	...	4,777
Cases attended as monthly nurse ...	...	...	...	...	...	2,456
Doctor sent for for mother ...	...	...	...	...	...	1,906
Doctor sent for for child ...	...	...	...	...	...	263
Stillbirths ...	...	...	...	...	...	63
Death of mother ...	...	...	...	...	...	9
Death of child ...	...	...	...	...	...	22

The midwives working under Committees attended 3,562 midwifery and 2,190 maternity cases, those working independently 120 midwifery and 206 maternity cases. The Association midwives showed a decrease of 260 midwifery and an increase of 268 maternity cases, the independent midwives an increase of 35 midwifery and 51 maternity cases.

Only one independent midwife had more than 25 midwifery cases, and her number was 55. 11 of these midwives had no midwifery cases but between them attended 58 maternity cases, while 13 had no cases at all. The 51 midwives in the Maternity Units attended 1,155 cases.

Nine deaths of mothers were recorded during the year in which midwives were in attendance as midwives.

Doctors were called in 1,906 times for the mother and 263 for the child; a percentage of 45.4.

Ante-Natal and Post-Natal Work. Under the ante-natal and post-natal scheme the total numbers of Somerset mothers ante-natally examined and of cases post-natally examined were respectively 1,399 and 205, at a total cost to the County estimated at £545 17s. 6d. The corresponding figures for evacuee women are 328 and 234, at a cost of £186 12s. 0d.

Consultants for Midwifery Scheme. Under the County scheme 82 cases were accepted and dealt with by the four consultant officers.

Assisted Admissions to Maternity Homes or Hospitals. During the year 490 applications were received for assisted admissions to a maternity home or hospital. The County Council accepted responsibility for 323 of these cases, an increase over the previous year of 106. The reasons for need of institutional treatment were:—

Actual or anticipated obstetric difficulty	121
Medical complication	29
Housing	87
Toxæmia	66
Abortions	20
	<hr/>
	323
	<hr/>

Treatment:—

(1) Viable pregnancies:	
Normal delivery	140
Medical treatment (normal delivery)	32
Pre-Natal treatment only (returned home)	7
Surgical obstetric treatment:	
Cæsarean	19
Induction	60
Forceps	17
Other	23
	<hr/>
	119
Post-Natal treatment	5
(2) Non-Viable:	
Routine care	9
Surgical treatment	11
	<hr/>
	323
	<hr/>

Results:—

	Mothers.	Babies.
Well	314	252
Fair	4	4
Not well	0	1
Improved	0	0
Born at home	0	7
Non-Viable	0	20
Died	5	41
	<hr/>	<hr/>
	323	325
	<hr/>	<hr/>

Of the above Somerset women 34 were admitted to emergency maternity units in the County for their confinement.

Dental Scheme for Expectant and Nursing Mothers.

This Scheme operates partly through private dental practitioners and partly through dental clinics staffed by officers of the County Council.

Private Practitioners' Cases. Of the 15 denture cases uncompleted at the end of 1941, 6 were satisfactorily fitted and the patients are making proper use of the dentures. 2 patients attended for extractions only, and the remaining 7 did not attend for further treatment. During 1942, 23 applications were received. 10 full dentures and 3 part dentures were fitted, and in every case a report has been received from a Medical Officer or Health Visitor that the dentures were satisfactory and in use. One patient attended for extractions and fillings only. In the remaining 9 cases dentures are not completed and the patients are still attending for treatment.

Under the main scheme clinics were held at Glastonbury, Frome and Bridgwater. The work done is shown in brief in the following table:—

	Glastonbury.	Frome.	Bridgwater.
No. of new patients	20	11	34
No. of sessions	20	25	25
No. of attendances for general treatment ...	56	61	99
Extractions	186	140	273
Fillings	3	22	15
Other treatment	1	28	8
No. of attendances for dentures	30	71	88
Impressions	21	37	46
Bites	14	26	20
Try-Ins	6	35	18
Plates inserted	7	24	29
Other treatment	1	1	6
Cases recommended for dentures	11	9	29

Maternal Mortality.

	1918	1928	1937	1938	1939	1940	1941	1942
Puerperal Sepsis	8	14	3	4	3	5	6	3
Other Accidents and Diseases of Pregnancy and Parturition	20	12	15	10	1	10	15	16
TOTAL ...	28	26	18	14	4	15	21	19
Rate per 1,000 Births ...	5.14	4.36	3.23	2.59	0.71	2.57	2.72	2.44

Puerperal Sepsis.

During the year 102 cases of Puerperal Pyrexia were notified. Arrangements have been made with different Hospitals to take in County cases, and facilities are offered. During 1942 33 cases were so admitted. The special unit at the Taunton Isolation Hospital again was of very great service and the results from this Hospital have been consistently good.

Care of Infants and Children under School Age.

The various problems raised were dealt with in some detail in earlier reports. The work has been continued and in some directions extensions have been made. It is work of essential importance, and this is not diminished but increased under war conditions. Only a summary of the County activities can be given.

(a) **Visits and Advice in the Homes.** During the year 6,946 births were referred to the Infant Visitors, 4,247 being in rural and 2,699 in urban areas. This service is well supervised and is a most important part of the scheme.

(b) **Infant Welfare Centres.** At the end of 1942 the Centres in the County, exclusive of those at Yeovil, Taunton and Weston-super-Mare which are outside the County Scheme, were the following:—Banwell, Bishop Sutton, Bridgwater, Chard, Chew Magna, Chew Stoke, Chewton Mendip, Cleve and Wraxall, Clevedon, Coleford, Compton Martin, Crewkerne, Curry Rivel, Dulverton, Farnborough, Frome, Glastonbury, Harptree, Highbridge, High Littleton, Huntspill, Kewstoke, Keynsham, Long Ashton, Mells, Midsomer Norton, Minehead, Nailsea, Paulton, Pill, Portishead, Priddy, Radstock, Shepton Mallet, Street, Timsbury and Tunley, Wellington, Wells, West Huntspill, Westbury-sub-Mendip, Westonzoyleland, Wraxall and Yatton.

The Centres at Bridgwater, Midsomer Norton and Radstock are directly controlled by the Council with the valuable assistance of local Committees; and the County Council also make grants towards the expenses of most of the others. Dr. Evans of the County Health Department also holds two small centres at Banwell and Kewstoke.

Bridgwater Infant Welfare Centre.

Births. During 1942, the number of births notified in the Borough (including still-births and cases later transferred to other districts) was 801; of these 789 were attended by midwives. A doctor was called in to help the midwives in 195 cases. 17 babies died during the year, a rate of 40.0 deaths per 1,000 births.

Home Visiting. No. of children on visiting list 1,757; total visits paid to infants 5,891.

Centre. Number of individual children who attended, 818; individual mothers, 688; average attendance per session—children under 1 year, 38, 1 to 5 years, 42; average attendance per session of mothers, 36; number of attendances—children 8,000, mothers 3,600; number of medical consultations for infants, 1,573; for women (excluding ante-natal), 212; sessions held, 100. The medical work was carried out by Dr. Halliday.

No regular ante-natal examinations are now carried out at this centre, as the work is done through local medical practitioners. 21 women not covered by the County scheme presented themselves for advice and were seen, making in all 40 attendances.

The figures show an increase in the amount of work undertaken by the Centre, and are very satisfactory.

Radstock and Midsomer Norton Infant Welfare Centres.

These centres are managed by the County Council with voluntary assistance. Sessions are held twice monthly in each centre, *i.e.*, at the Victoria Hall, Radstock, and the Women's Institute Hut, Welton, Midsomer Norton. Medical consultations are held alternate sessions and educational programmes are arranged for intermediate dates. Dr. Hilda Ashworth, a local practitioner, acts as Medical Officer, attending once a month. The appointed Infant Visitors (the district nurses) attend and the work is carried on in direct relation to the existing Infant Welfare schemes.

The figures for these centres are as follows:—

	Radstock.	Midsomer Norton.
Sessions held	24	22
Individual children who attended	175	229
Individual mothers who attended	134	203
Average fortnightly attendance of children { under 1 year... ..	15	13
{ 1—5 years	13	59
Average fortnightly attendance of mothers	18	66
Number of attendances of children { under 1 year	353	292
{ 1—5 years	312	1,300
Number of attendances of mothers	427	1,450
Number of medical consultations { children	288	187
{ mothers	48	None.
Number of individual children attending centre born in 1942	56	51
Number of individual children attending centre born previous to 1942	122	148
Number of infants attending for the <i>first time</i> during 1942 ...	98	137
Under 1 year on first attendance	79	67
Aged 1—5 years on first attendance	19	70

Banwell and Kewstoke Infant Welfare Centres.

[illegible]

(c) **Medical Inspection of Three-year-old Children.** There are many practical difficulties in its way, and during the year no routine examinations of such children were carried out in the County.

(d) **Treatment and Supervision of Abnormal Children.** 399 reports were received, including a few from doctors or through the Orthopædic Centres. They include a miscellaneous series of conditions and no scientific classification is possible. They have been grouped as follows to give an idea of the conditions to be dealt with:—Malnutrition 40, Rickets 22, Debility 15, Catarrhal 17, Minor Postural Defects 52, Orthopædic 88, Eye Defects 65, Tonsils, Otorrhœa, etc., 13, other defects 87.

The figures show that many children get treatment with maltoline, oil and malt, etc., or are given treatment through one or more of the various County Schemes. For others it is only necessary to keep them under special observation.

The following is a summary of this work:—

Condition.	No. Reported.	Extra Nourishment Grant.	Treated at F.C. or I.W.C.	Treated Privately or Hospital.	Treated by County.
Malnutrition	40	37	19	2	1(a); 2(d).
Rickets (early)	13	2	6	6	3(c).
Rickets with deformity	9	1	5	2	9(c).
Debility	15	14	3	4	—
Catarrhal	17	14	2	10	—
Tonsils & Adenoids, Otorrhœa, etc.	13	—	1	5	10(g); 1(i).
Minor Postural	52	3	20	18	42(c).
Orthopædic	88	—	12	43	79(c); 1(d).
Eye defects (Squint 52, other 13)...	65	—	9	14	35(b); 5(h).
Miscellaneous	87	1	17	35	24(a); 2(c); 9(d); 5(e); 1(g); 1(h).
	399	72	94	139	230

(a) Mary Stanley Home 25; (b) County Oculist 35; (c) Orthopædic Clinic 135; (d) Tuberculosis Clinic 12; (e) Public Assistance Institution 5; (f) Nursery Treatment 0; (g) Tonsils and Adenoids Operation 11; (h) S.C.A.W.B. 6; (i) Special School 1.

(e) **Baby Hospital, Bridgwater.** The following is a summary of the year's work:—Number in Ward, January 1st, 7; admitted during 1942, 27; total 34. The reasons for admission were, as before, mainly nutritional difficulties and prematurity. All made satisfactory improvement except 5 who died. Average length of stay of cases discharged in 1942—11 weeks.

Special Institutional Treatment for Children from 1 to 5 years of age.

One child suffering from persistent eczema was accepted under this scheme for treatment at the Bristol Children's Hospital. The County Council is also paying part cost of training of a partially deaf child at the Royal Residential School for the Deaf, Manchester.

Ophthalmia Neonatorum.

In recent years only one case of ophthalmia neonatorum has resulted in blindness and it is mentioned specially because it failed to be recorded in this report as inquiries were not completed at the time. The case occurred in December, 1941, at Highbridge. Acute catarrhal infection of the eyes developed 13 days after birth. It was promptly notified but there was considerable delay in obtaining hospital treatment and complete blindness resulted. There is a number of blind babies on the Blind Register but all of these, with this one exception, seem to have been due to congenital defects.

During 1942, 24 cases were notified. Of these 9 cases were sent to hospital. The distribution of the cases is shown in Table VI. All the cases in which treatment was completed showed vision unimpaired at the time of the report. One child returned to London before treatment was completed.

Flying Clinics.

Medical Officers were unable to include in their programme of work any "flying clinic" visits in 1942. The routine consultations at established Welfare Centres were, however, continued.

Birth Control.

During the year the number of applications received by Dr. Halliday from various sources for advice and assistance was 15. These cases were all referred to clinics or to private doctors.

Nursing and Maternity Homes.

At the end of the year the number of homes on the Register was 52. They were all visited from time to time by Dr. Halliday or Miss Nobes to see that the premises were in order and the requirements of the County Council complied with as regards management.

Child Life Protection.

The children on our Register at the end of 1942 numbered 257, and as regards methods of payment may be grouped as follows:—Weekly payments 203, single lump sum payment 1, otherwise paid for (mostly monthly or irregularly) 6, not stated 47.

The number of foster mothers with one child only is 114, with two children—30, with three children—3, with four children—3, with over four children—8.

The foster mothers who run a regular baby home are therefore few, and those with over four infants are one at Congresbury with 13 at the end of 1942 (authorised for 20); one at Ashbrittle with 7 (authorised for 10); one at Wembdon with 7 (authorised for 7); one at Hill-common with 9 (authorised for 35); one at Wellington with 5 (authorised for 18); one at Loxton with 5 (authorised for 5); one at Clevedon with 11 (authorised for 15); and one at Dunster with 5 (authorised for 5).

ORTHOPÆDIC SCHEME.

The County Scheme, and the results of working during 1942, are described in considerable detail in my report for 1942 as School Medical Officer. 536 new cases were seen and dealt with through the Clinics.

WATER SUPPLIES.

During the year no works on a large scale were carried out. Although many supplies were sorely taxed, due to the abnormal demands, there was no serious shortage for domestic purposes. Owing to intensive food production more and more water is being demanded and it is highly probable that in the future consumption will steadily rise.

There is need for a survey to be made of the water resources of the County which have not yet been utilised. This should be carried out as soon as possible and made on a broad basis. This should include special consideration of those farm and industrial requirements for which pure water is unnecessary. If such discrimination is made relief will be afforded to water sources needed for domestic uses and for milk production purposes. Such an inquiry would include the provision of sufficient storage reservoirs, as much water runs to waste in seasons of heavy rainfall.

Most of the water supplies serving over 1,000 people are now chlorinated. Inspections have shown that unless such plants are properly housed and have heating apparatus to maintain the appropriate temperature in frosty weather, and receive adequate supervision with check tests respecting chlorine residue, their value in the purification process is irregular and therefore unreliable. Charts should be hung in all chlorinating plant housing recording visits, check tests and other essential particulars.

The two worst districts in the County suffering from insufficient supplies are Langport and Wells Rurals. Schemes have been prepared and as soon as labour and materials become available it is hoped that the necessary works will be proceeded with.

Several schemes to augment local supplies were put in hand and completed and a number of extensions made as follows:—

WESTON-SUPER-MARE BOROUGH. Main supply extended to top of Bleadon Hill.

ILMINSTER U.D. Installation of a duplicate booster pump to meet increased consumption.

MINEHEAD U.D. A new reservoir at Nutscale giving much increased storage and a good reserve, completed early in the year.

WATCHET U.D. Old well cleaned out for use as emergency supply; should it be required will yield 10 gallons per head per day.

BATHAVON R.D. Peasedown St. John supply augmented from a spring supplying the hamlet of Shoscombe. Pumping plant with about $\frac{3}{4}$ of a mile of 3-inch main and chlorinating apparatus installed. Previous to this the arrangement was for a supply from Norton Radstock U.D. which, particularly in the summer, was insufficient.

BRIDGWATER R.D. Increased storage provided at Middlezoy and Othery to meet shortage experienced in the villages during peak draw-off hours.

CLUTTON R.D. Two new springs connected to the supply from the Townsend Pumping Station, East Harptree, to assist in meeting any shortage.

WELLS R.D. *North Wootton*—conversion of pump to an electric drive; an economy scheme.

WINCANTON R.D. *Henstridge*—to meet a new demand works on reservoir commenced.

YEOVIL R.D. Extension of main at Thorne Cross carried out. A new 4-inch main from Chilthorne Damer to Limington completed.

Odcombe—works carried out to overcome shortage felt at peak draw-off hours.

RIVER POLLUTION AND SEWAGE DISPOSAL.

A number of new works has been provided in the County but not by Local Authorities. Several extensions, however, have been carried out by the latter. Work has generally been limited to that of maintenance.

BRIDGWATER BOROUGH. A new effluent sewer.

ILMINSTER U.D. Negotiations on foot to acquire additional land for sewage treatment by broad irrigation.

KEYNSHAM U.D.—Extension of 290 yards of a 12-inch sewer.

YEOVIL R.D. Extension of 9-inch sewer at Martock completed.

On the whole in spite of labour shortage the maintenance of purification works by Local Authorities can be considered reasonably good and there was very little gross neglect. Some disposal works originally adequate to deal with the waste being sent to them daily, are now inadequate. One of the worst cases is the works at Wincanton. A conference with representatives of the Local Authority and other interested parties was held to discuss the position as there was considerable pollution of the River Cale. Consultants have been called in and it is hoped that when circumstances permit appropriate steps will be taken.

Rode Sewage Disposal Works which were visited several times during the year are still unsatisfactory. There is a marked excess of sewage liquors entering the works over and above what the works were designed for.

Numerous inspections of works have been made during the year and many effluent samples taken.

As in previous years great attention has been paid to river pollution problems, and this in spite of shortage of staff and other difficulties. The Health Department does not wait for complaints to be made but there is fairly frequent routine visiting and sampling of effluents, streams and other places where river pollution may be anticipated. It is unfortunate that the present laws as to river pollution are so comparatively ineffective.

Actually few complaints were received. Three cases were reported involving loss of fish life in the rivers Parrett, Frome and Tone and these were promptly and fully investigated and appropriate action taken. A further case dealt with pollution of the stream taking the Crewkerne effluent from their eastern outfall which was justified and action has been continuous since to get these works, which are unsatisfactory, made effective.

HOUSING.

Owing to the limitation of labour and materials, no progress in the provision of new houses could be made.

Cases of serious overcrowding in the County are markedly reduced in comparison with the previous year. Four Authorities report no change, 18 reduced overcrowding and 2 none at all. Many houses condemned prior to the war as insanitary or unfit have been repaired to make them reasonably fit for occupation and are occupied.

The demand for new houses is considerable; one rural authority alone has a list of applicants numbering 781. In view of the increased work on the land there is a serious shortage of dwellings for farm workers. Local Authorities are making a survey of their post-war needs.

Housing (Rural Workers) Acts. A few applications were received during the year. Assistance by grant or loan or both is still available; certain war-time restrictions still continue including (a) the proposals must show new and increased accommodation; (b) the occupant can only be a farm worker.

Local Authorities could do something to improve the position by purchasing suitable properties and have the necessary works carried out. They would rank for the grant just the same as a private individual.

SUPERVISION OVER THE FOOD SUPPLY.

A. Slaughter Houses and Meat Supervision.

The arrangements are on the same lines as those reported in a previous Annual Report.

B. Milk Supply.

As regards Designated Milks, there has been an increase in the number of both Tuberculin Tested and Accredited milk producers, particularly Accredited.

Year (at end of).		T.T.		Accredited.
1936	...	126	...	285
1937	...	159	...	506
1938	...	264	...	623
1939	...	320	...	800
1940	...	305	...	849
1941	...	275	...	817
1942	...	297	...	871

Owing to shortage of staff and other difficulties producers have found it difficult to maintain standards, and undoubtedly there has been some falling away in the production standard. The standards for Designated Milks have not been lowered, except that some latitude has been given as regards structural non-essential alterations, while existing difficulties are taken into consideration.

In the County Laboratory 2,060 Accredited and 1,009 T.T. and Pasteurised milk samples were also examined. The total number of milk samples examined for various purposes was 3,777.

Special Sampling of Herds. During the year 448 samples of the mixed milk of herds in the County were examined. In 5 the test period was insufficient (the guinea-pig dying prematurely); in 25 tubercle bacilli were found. Investigation of these herds involved the examination of 133 samples from groups of cows and 85 samples from individual cows, from which 15 cows in 13 herds giving tuberculous milk were found and destroyed. In 7 herds the infected animal had probably been removed. Four herds are still under investigation, but there was one herd in which no cow with tubercular mastitis was found.

Nine Somerset herds were reported from Bristol to contain tubercle bacilli; 5 cows from five herds with tubercular mastitis have been found and destroyed. In 4 herds the infected animal had probably been removed.

“Accredited” milk, not unnaturally, is assumed by the public to be a safer milk supply, but this is incorrect. It is no safer than ordinary milk from the risks of conveying the acute infectious diseases or undulant fever, while as regards tuberculosis the following figures are illuminating:—

Examinations of Somerset herds for tubercle bacilli.

Year.	Ungraded herds.			Accredited herds.		
	Number examined.	Number containing living tubercle bacilli.	Percentage positive.	Number examined.	Number containing living tubercle bacilli.	Percentage positive.
1936 ...	377	12	3.2	73	3	4.1
1937 ...	269	8	3.0	116	3	2.6
1938 ...	302	6	1.9	120	7	5.8
1939 ...	296	6	2.0	135	7	5.2
1940 ...	229	10	4.3	181	15	8.2
1941 ...	185	8	4.3	285	13	4.5
1942 ...	186	5	2.6	262	20	7.6
7 years ...	1,844	55	2.98	1,172	68	5.8

These figures accord with those from other areas, of which the following are examples:—

Area.	Period.	Percentages containing tubercle bacilli.	
		Ungraded.	Accredited.
Sheffield	8 years (1935-42)	6.7	9.1
Leeds	10 years (1933-42)	2.26	6.28
Manchester	7 years (1936-42)	9.67	11.3
Bristol	7 years (1936-42)	6.22	10.1
Liverpool	10 years (1933-42)	9.07	4.2
London County Council	1936	6.5	13.4
do.	1937	6.6	9.6
do.	1938	6.9	11.6
do.	1939	7.5	7.0
do.	1940	8.1	13.8
do.	1941	5.0	9.4
do.	1942	4.4	4.5

ADMINISTRATION OF THE SALE OF FOOD AND DRUGS ACT.

During the year 899 samples were examined. Of these, 10 were submitted by private individuals and Medical Officers of Health, and 17 were “Appeal to Cow” samples. The percentage found adulterated was 4.47. The following Table shows the nature of the 872 samples submitted by the Inspectors, excluding the 17 “Appeal to Cow” samples.

TABLE XII.
Nature of Samples submitted by Inspectors.

Article.	Number examined.	Number genuine.	Number adulterated.	Per cent. adulterated.
Dairy Products—Milk	420	387	33	7.65
Cheese	9	9	0	0
Butter	41	41	0	0
Condensed Milk	6	6	0	0
Dried Milk	4	4	0	0
Edible Fats	26	26	0	0
Cereals	20	20	0	0
Meat and Fish Products	51	51	0	0
Tea, Coffee, Cocoa	22	22	0	0
Condiments	31	31	0	0
Sugar Products	32	32	0	0
Food Substitutes—Egg, Lemons, Orange	5	3	2	40
Miscellaneous Groceries	60	60	0	0
Beer, Spirits and Wine	57	56	1	1.7
Drugs	88	85	3	3.4
TOTAL	872	833	39	4.47

8 prosecutions were instituted (7 milk and 1 spirit), adulterations ranging from 9 to 40 per cent. of added water and including one milk showing 30 per cent. abstraction of fat. Five fines of £5 were imposed, two cases were dismissed under the Probation of Offenders Act on payment of costs, and one was dismissed outright.

PUBLIC HEALTH LABORATORY.

During the past year 17,651 samples have been examined (excluding all food and drug samples) as follows. Forty-one tuberculin dilutions were made and sent out.

Drinking Water—

Bacteriological examinations	1,260
Chemical analyses	43
Sewage, sewage effluents, rivers and streams	41
Swabs for diphtheria bacilli	5,084
Cerebro spinal fluid and post nasal swabs	77
Sputum for tubercle bacilli	2,436
Blood for typhoid, paratyphoid, other Salmonella, dysentery, and Br. abortus	150
Hairs and skin for ringworm	63
Specimens for venereal disease	769
Urine for tubercle bacilli, B. coli, sugar, albumin, casts, etc.	227
Faeces for typhoid and dysentery	359
Swabs for hæmolytic streptococci	2,933
Milk for tubercle bacilli	668
Milk for bacteriological examination (general)	40
Milk—Accredited	2,060
Milk—T.T. and Pasteurised	1,009
Other specimens	432
Total	17,651



